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How to Succeed as a Physician.

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HOW TO BE SUCCESSFUL AS A PHYSICIAN

HEART-TO-HEART TALKS OF A SUCCESSFUL PHYSICIAN WITH HIS BROTHER PRACTITIONERS

"Bad men spring from bad things; hence, let us correct the things"—Victor Hugo

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MERIDEN CONN
THE CHURCH PUBLISHING COMPANY
1902

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1.P.153.

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PREFACE.

The writer of this little book—purposely little in order that it may be more widely read, for there is much more to say—although brought up in his father's office, had no inclination or intention of studying medicine, his whole attention having been given for some years to studies in an entirely different field. While residing in New York, having read Buckle's "History of Civilization," he was interested to know what Dr. Draper had written on the subject, so he purchased his "History of the Intellectual Development of Europe," which had recently appeared, and he was charmed with the work. Speaking to a clergyman one day regarding the work, the writer was told that Dr. Draper was lecturing on physiology nearly every day at the University Medical School. The next day he attended Dr. Draper's lecture, which happened to be near the beginning of the course, and he was so pleased that during the winter he attended the entire course and also read Dr. Draper's interesting book on "Human Physiology, Statical and Dynamical; or, The Conditions and Course of the Life of Man," a book as interesting as a novel.

During the following summer the writer read up thoroughly on physiology and anatomy, and became so interested that the following winter he was matriculated at the University Medical School, and in due time was graduated with a diploma conferring upon him the right to practice medicine. But he felt that he was as yet only on the borderland of medicine, so he went to Boston the following winter and attended the course at the Harvard Medical School, and the next winter he attended the course at the University of Maryland. His father at that time becoming ill and unable to attend to his practice, the writer came home and succeeded him in the practice of his profession. After seven years of hard work the writer went abroad and for nearly a year followed hospital practice in Paris and London, and four years afterward he attended a post-graduate course in New York.

When he began practice, the writer formed a resolution that when he had reached his fiftieth year he would retire from his profession and devote his time to those studies which all of his life have been a source of great pleasure and recreation to him and which have brought him some reputation in this country and abroad. But when he had reached his fiftieth year he found it impossible to give up a practice that he had been so many years in building up and which had proved so pleasant and remunerative. For years, in the frosts of winter, the suns of summer, in midnight and in storm, early and

late, with toilsome days and sleepless nights he has attended faithfully to his business. But when he reached his fiftieth year he dropped all obstetric practice and limited his practice as much as possible to the old families who had stood by him so many years, thus giving him more time to his favorite studies.

During thirty-seven years of practice the writer has met with a great many physicians, north, south, east and west, and he has taken great pleasure in studying them, so to speak, both microscopically and pathologically, as well as anthropologically. He has found a great many educated gentlemen, hard and faithful workers in the profession, and he has found a good many —to say the least—otherwise. The writer trusts that many of them will find this little book interesting reading.

When the writer began the practice of medicine there were only three other physicians in the town. Now they average thirty. During thirty-seven years some twenty others have been in the town. Several have died in the harness; a number have left the town for fresher fields; some have left the profession for more remunerative business. But there is always room for one more.

The reader will please excuse this long preface for so little a book.

Meriden, Conn.

How to Succeed as a Physician.

CHAPTER I.

THE LEGAL AND CLERICAL PROFESSIONS.

The business on this earth is to get a living, in competition with other men. Many young men, not having the capital or the inclination to enter upon a business life, look forward to some of the professions as a genteel and easy method of making a living. If a young man is bright, and smart, and shrewd, a ready speaker, and perhaps interested in politics, he takes to the law. There are many such young men, and the supply has been greater than the demand, until the profession is very much overcrowded, and thousands of bright young men are not earning their salt.

From the time of the Mosaic Code to Justinian,

and from Justinian down to recent times, law has been a field of the noblest triumphs and most gross perversions of the human intellect. No profession offers such extremes of glory and shame. From the most wretched sophistry to the grandest inference, from a quibble to a principle, from the august minister of justice to the low petifogger, how great the distance; yet all are included within the common pale. Law continues to exist on precedent, and often proceeds without regard to common sense and existing facts.

Lawyers are a necessary evil. No matter how peaceable a man may be, we are constantly reminded of the law, by seeing sheriff's sales, marriage certificates, prisons, courts, and policemen. Coleridge thought that "upon the whole, the advocate is placed in a position unfavorable to his moral being, and, indeed, to his intellect also, in its higher powers." Foote, the writer and actor, feigned surprise to a farmer that attorneys were buried, in the country, like other men; in town, he declared, it was the custom to place the body in a chamber, with an open win-

dow, and it was sure to disappear during the night, leaving a smell of sulphur.

Many enter the law as a stepping stone to political preferment, and from the predominence of this class originate half the errors of American legislation, and the perversion of the great ends of legislative action. Many enter the profession with but a limited preliminary education, and with a superficial knowledge and practice of law, rendering them only adepts in chicanery, and the "gift of gab."

The great principle of law is to make business for itself, but if a man is without any moral principle, the cunning tergiversations of this legal adventurer identify him with sharpers and roguery. Of course there are learned legal gentlemen who are ornaments of society, and the intellectual benefactors of the country. Such men never "badger a witness," or use a mean abuse of that power which is legally vested in judge and advocate, whereby they can, at pleasure, insult and torment each other, and all exposed to their questions, with impunity.

But law is *per se* no longer a profession. Spec-

ialism has split it up into a half dozen or more divisions. Juries and courts no longer call for eloquence. Old theories and the science of law are of little value. Commercial and industrial law is more profitable, and to be a good commercial lawyer, he has got to be a first-class business man. There are millions of dollars worth of property, scores of conflicting interests. He must help to reconcile these conflicting interests, organize and fuse them into a whole, so that the enterprise will legally hold water and prosper.

If a young man is "pale, sickly, and pious," who is fond of reading good books and attending church, he thinks, or his fond parents think, that he should be set apart to serve the Lord. Such a young man takes to religion as he would to croup or measles. He goes through the preparatory school, college, and seminary, and then starts out in life to make the world better. Instead of preaching God's word in the stars, in the flowers, in the development of all that is good in man, in the growing philanthropy and growing benevolence of mankind, he preaches wornout creeds and dogmas full of crudities, cruelties,

blasphemies, made by men in the dark ages, who knew absolutely nothing of the wonderful works of God in this world. They try to bring down the Deity to a level with their own narrow ideas; and to obtain favors which are not in accordance with justice, and persuade the great Father of the Universe to break the unchangeable laws of nature, in order that they may be especially benefitted.

The majority of churchgoers evidently enjoy this kind of preaching, for the result of the accretions of nearly 1,900 years of creeds, dogmas, and useless deleterious doctrines which have surrounded the slender growth of original Christianity, has steeped the great mass of people in superstition.

The work of the ministry calls into exercise every nerve and sinew of mental power, and requires the use of the peculiar talents of every other profession. The ministry requires men of clear vision and resolute faith, of large understanding; men of big heads and broad minds, of large preception and clear insight. As Rev. Dr. Hillis says: The clergyman of today must make

himself an expert in social reform; master the facts of illiteracy, vice and crime. In cities, he must study the tenement house question, and all social movements in connection with settlements and methods of Christian work. He must carry his studies into physiology and hygiene in order to note how low and abnormal physical conditions effect the conscience and spiritual state. Giving up the older theological reading, he must study history, politics, the rise of law, the movements of art, the history of philosophy, and, above all else, science. To keep step with his work he must read the periodicals, American and foreign. There will be at least a hundred books each year that he must read.

But such men are very rare in the pulpit today. Minds that are put through the theological mill of the dark ages are apt to turn out nonentities, as far as individual thought and reason are concerned, mere repeaters of things they have been told. As some one has said, "Such minds have no living message for any one, they are merely speaking-tubes through which the history of the past comes down to us.

God help those who have to rely on what they have to give." Consequently the inspiration of the day comes not from the pulpit. Religious progress has always lagged, and still lags behind scientific progress.

The majority of clergymen are ordinary commonplace men. To speak earnestly and impressively in public is a talent which probably not one man in a hundred possesses, and it requires great talent to prepare two sermons for each Sunday, so most of the sermons are merely changes rung upon a certain phraseology, and a certain set of dogmatic assertions, which their hearers may or may not assent to. How it ever came to be received among Christian communities that people could not assemble on Sunday to worship the Lord without having to listen for a certain time to the ideas, or want of ideas, of a man neither wiser or better than themselves, it is difficult to tell.

Young men are discouraged from the ministery because the formularies of the Church concedes nothing to the conclusions of experience, which in innumerable ways modify, if they do not deny,

the dogmas of theology. The Church insists on a literal acceptance of miracles, even when miracles plainly involve a breach of continuity in nature. The ancient formularies, in fact, if interpreted literally, would flatly deny much concerning the world and nature that the clergyman learned in school and college. Many men in the pulpit spend their whole career in the quixotic attempt to breath life into some passing phase of denominational theology. If candidates for the ministry could receive an assurance that the Church imposed no penalty on an honest search for the truth, even if it sometimes led to conclusions contrary to denominational theology, the sacred profession would be sought by many who would reflect honor on it, but who, under the present circumstances, are unwilling to barter their intellectual birthright for a mess of denominational pottage.

The brightest men are therefore keeping out of the pulpit, and are turning to a business life, or taking up some of the professions such as law, civil and electrical engineering, etc., where there is an opportunity for their talents to be appre-

ciated, as well as the opportunity of making a good living. The ranks of the clergy are over crowded with poor material, and the pay is very poor. There are often from fifty to a hundred applicants for a vacant pulpit, either from the unemployed, or for an opportunity to get an increase of salary. In the Presbyterian denomination alone, in 1891, one-eighth of the entire ministry of the church depended upon the relief board for their support. There were 1,600 ministers in the denomination without charges, and without salaries. There were 3,300 churches which were not self-sustaining, and the pastors of which could be paid only a few hundred dollars a year salary.

CHAPTER II.

PHYSICIANS AND THEIR INCOMES.

Doctors are a necessary evil, owing to the great ignorance of the people. There are about 1,500,000 deaths annually in the United States, at least 500,000 more than there would be if we could carry out sanitary reforms of proved efficacy. According to Dr. Farr, the world's great vital statistician, for every death there are, on the average, two years of illness in the community. Each wasted life is worth at least $1,000. Considering the cost of sickness and death, we get some highly interesting data. Let us see how it looks.

Lives of 1,500,000 at $1,000 each, ...	$1,500,000,000
Burial expenses of 1,500,000, funerals at an average of $100 each, ...	150,000,000

Loss of wages of 3,000,000 years of illness (2 years for each death) at average annual income, $300	900,000,000
Yearly income of 110,000 physicians at $1,500 each	165,000,000
Four thousand hospitals and dispensaries average annual expense, $25,000	100,000,000
Appliances, instruments, etc., medicines and prescriptions, $1,000 each for 110,000 physicians	110,000,000
Values of gratuitous and paid services rendered by staffs of hospitals, etc., . .	30,000,000
Services of 30,000 nurses at $750 annually,	22,500,000
Total, exclusive of cost of public hygiene and sanitation by cities, states, and the National Government,*	$2,977,500,000

To lessen the sickness and death rates, to saving life and preventing sorrow, is the mission of some 135,000 physicians in the United States, but by so doing they are willingly committing professional suicide, by extinguishing their own curative and professional function. The medical profession differs from all others, in that it is the only profession which is self-destructive. While we live by ministering to the wants of those are who suffering by accident and disease, yet the

* Statistics of Dr. George M. Gould. Nearly three thousand million dollars.

medical profession is foremost in the endeavor to abate disease and to prevent accident.

Notwithstanding this, physicians are as plenty as the raindrops falling on the roof, or the leaves of the trees in springtime, or as the sands on the seashore, and the competition is fierce and relentless. The medical profession is not only over crowded, but the situation is continually growing worse. The blanks in the medical profession are many, and the prizes are few. As a means of money-making the profession of medicine does not equal any mechanical trade. Probably not one per cent. of all practitioners become even moderately rich from their practice. As a business proposition we doubt if most men of good ability will find a very adequate reward for the time and money invested. If the physician takes in $1,000 a year, this represents an income of just $2.73 per diem, a trifle more than what unskilled labor commands. The physician may spend four years at a medical school, costing him, besides his time, about $2,000, and yet he does not get the income of a carpenter or a factory hand. Yet thousands enter the ranks

every year with great hopes and expectations. One-third never get beyond the threshold, others drop by the wayside year by year. It is true that all business is a relentless struggle in which the weaker are constantly over-powered and borne down to ruin. "We must fight if we would win," is inexorable law. Not only in the medical profession, but also in the legal profession, thousands "go to the wall" every year, the victims in the struggle for mere existence.

It is safe to say that there is an ominous decline of patronage in every department of professional work. From the larger cities comes the story that few if any of the hitherto successful practitioners are overworked. The falling off of receipts averages from a third to a half of those earned in previous years. This is owing in a large degree to the multiplicity of free hospitals and clinics, to prescribing by apothecaries, and to the use of patent medicines which are so largely advertised in all the papers. Of course, some credit may be given to a healthier mode of living, the practice of athletics, etc., and above all to the immense amount of competition.

Many young physicians expect to get rich in a very short time. They expect to have a nice house, keep a carriage and horses, with a man to take care of them and drive him about in making his numerous calls. But they forget that there is an aphorism of respectable antiquity which seriously advises the producers of poultry to postpone the census of juvenile fowls till the period of incubation is terminated.

The young physician, "just off the griddle," having received his sheepskin, begins to look around for a location where he can display his wisdom, heal the sick, become an honorable member of the community, and have as easy a time as the president of a life insurance company. But he will soon be confronted with the fact that there is very little room for him, and he will have to crowd in where "two are company and three are none." And yet over 155 medical schools are turning out annually a crop of nearly 6,000 graduates, or over two thousand more than can by any possible means be provided for.

Says Dr. A. N. Ellis (Cincinnati Lancet Clinic), "I have heard a great deal about there

being room at the top. I don't believe a word of it. I know lots of young men of skill, learning and industry, in this city of Cincinnati who do not make a decent living, and why? Because the supply exceeds the demand."

There are in the United States about 135,000 physicians, or one to every 655 of the inhabitants; while Germany has one physician to 2,114. In California there is a physician to 416 inhabitants; in Colorado, one to 452; in Vermont, one to 469; in Ohio, one to 489; in Indiana, one to 494; in Missouri, one to 507; in Arkansas, one to 546; in Kansas, Tennessee, and Maine, one to 556; in Massachusetts, one to 561; in Illinois, one to 562; in New Hampshire, one to 564; in Maryland, one to 565; in Michigan, one to 570; in Texas, one to 612; in Kentucky, one to 625; in Oregon, one to 638; Pennsylvania, West Virginia, Connecticut, Rhode Island are somewhat less supplied, the figures being 662, 667, 687, 692. New Jersey is more fortunate, there being only one to 856. Minnesota has one to 1,004; South Carolina, one to 1,023; North Carolina, one to 1,023; New Mexico, one to

1,095. In 1870 there were 527 women physicians, and in 1890 there were 4,555.*

In 1898-99, there were enrolled in 153 medical schools during the period 23,778 students, an increase of 345 over the previous year. Of these, 20,338 men and 1,083 women were enrolled in the regular schools; 1,487 men and 315 women in the homeopathic; 452 men and 48 women in the eclectic; and 65 men and 10 women in the physiomedical. Of the graduates from regular schools, 1,879, from the homeopathic, 192, from the eclectic, 57, and from the physiomedical, 14, possessed the degree of A. B. or B. S.

Foreign countries are very much overcrowded with physicians. In Paris there are less than 500 inhabitants for one physician; and when it is considered how many of them apply to public

*In 1870 there were 9 women bookkeepers, in 1890, 27,777. In 1870 there were 66 women preachers, in 1890, 1,235. In 1870 there were 35 women journalists, in 1890, 888.

In 1891, one of every 2,888 inhabitants of the United States was a medical student. There is one medical school to every 500,000 population in this country. Great Britain has one to every 2,350,000; Germany, one to 2,500,000; Austria, one to 5,000,000.

institutions, very little is left for individual practice. In Great Britian during the past ten years the number of physicians increased by over 20 per cent., while the population increased only by 7 per cent. There is one physician to less than 1,000 possible patients. And of the 1,000, perhaps one-third or one-half are rarely sick, it shows that the average practitioner can only with the greatest difficulty earn a sufficient livelihood. There are in Russia 12,521 physicians to a population of 112,342,758, or one physician to every 8,800. This proportion is, however, only apparent, for while in some parts of the country there is one physician to every 250,000, or 300,000, and even 500,000, the proportion in larger cities is one to 1,000, and even less. As we shall see the fees are very low.

When we consider the expense of procuring a medical education, the long time it is necessary to wait for a paying practice, and the added expense of living, in the way of horse, instruments, books, journals, etc., the average income of physicians in the United States is remarkably low. Dr. C. Henri Leonard of Detroit, editor of

Leonard's Medical Journal, puts the average income of 50,000 physicians in the United States at $1,000, or less, and 50,000 at a yearly income of $500. This agrees in the main with Dr. Taylor of the *Medical World*, who puts the third class of 20,000 physicians, whose average income is $2,000 or less. Dr. Taylor remarks: "The masses of the medical profession are hard workers, they earn much more than they receive, they give a larger proportion of their time and services to charity, and to the cause of humanity and science, than any other class. Also, most of our worthy brethren live away from the large centers of population, scattered in towns, villages and hamlets, on the prairies, in the wood-lands, wherever humanity has sought out an abiding place, there faithful physicians have followed, and are ready to serve. In these comparatively out-of-the-way places the expenses of living are very low compared to the expenses of city life. Rents are low, eatables are cheap, horse feed can be gotten usually from patrons not able to pay in cash, there is not so much 'style' to keep up, and hence an income of $1,000 or $2,000, under

these circumstances means a very different thing from what it would were all these conditions all reversed, hence fees must be correspondingly low."

Dr. Taylor estimates that 8,000 physicians average $3,000 a year, but that many practitioners in large cities do not make as much, although their expenses are double or more than their country brethren. A $1,000 practice in the country is, perhaps, equal to a $3,000 practice in New York city. The next class comprise 5,000 whose average income runs from $3,500 to $7,000, averaging perhaps about $5,000. These include the surgeons and specialists of the larger cities. This leaves only 2,000 physicians with an income more than $7,000 per year. These are found in the large cities, and perhaps 1,500 will average $10,000 a year. Now we have only 500 left, and these include the surgeons, oculists, gynecologists, and other specialists who can charge large fees.

Of these 500 Dr. Taylor sums up as follows:

200 receive $20,000 each per year.
150 " 25,000 " " "
100 " 30,000 " " "
50 " above $30,000 each per year, the latter averaging $45,000.

The amount of money paid to physicians in the United States every year Dr. Taylor sums up as follows :

100,000	times	$1,000	equals	$100,000,000
20,000	"	2,000	"	40,000,000
8,000	"	3,000	"	24,000,000
5,000	"	5,000	"	25,000,000
1,500	"	10,000	"	15,000,000
200	"	20,000	"	4,000,000
150	"	25,000	"	3,750,000
100	"	30,000	"	3,000,000
50	"	45,000	"	2,250,000
	Grand Total,			$217,000,000.

It must be remembered that this is for *services* only—medicine and appliances of all kinds are not included in this estimate.

Dr. Shrady, of the *Medical Record*, estimates that the average annual income of a physician in full practice in a large city may be stated at $2,000, and in the smaller towns and in strictly rural districts at $1,200. Two or three physicians in New York make over $100,000 each year; five or six range from $50,000 to $60,000; fifty from $25,000 to $30,000; 150 from $10,000 to $12,000; about 300 from $5,000 to $6,000;

1,500 from $2,000 to $3,000, and the remainder from $800 to $1,000.

The following are some of the large medical fees:

Samuel J. Tilden's physicians charged $143,000 for seven years' services. The sum of $14,800 was the fee for a post-mortem examination of the body of Vice-President Wheeler, who died in 1887. Jay Gould, who died in 1893, leaving an estate valued at $72,000,000, paid his doctor a regular salary of $15,000 a year, whether sick or well. For two months' attendance upon his daughter, Mr. Gould paid $87,000. President Garfield's physicians received $27,500 for service rendered the distinguished patient at Elberon, N. J. In 1768, when the Empress of Russia was stricken with smallpox, her physician received $60,000. When Edward VII was ill with fever he paid his physician $50,000 for four weeks' services. The Czar of Russia paid $50,000 for two days' attendance from physicians.

H. M. Flagler, of the Standard Oil Co., paid Dr. George Shelton $100,000 for attending his daughter, the services extending over a number

of months. The late Dr. Pepper of Philadelphia received a fee of $10,000 for one visit to Erie, and it is said that his practice for nine months at one time amounted to $60,000. Wm. C. Whitney gave his physician $25,000 for a week's attendance. Sir Wm. Jenner was called in for a period of four weeks to attend King Edward—then Prince of Wales—ill with typhoid, and received $12,500 per week and a baronetcy. Sir Morell Mackenzie, who attended the Emperor Frederick in his last illness, received $100,000. Professor Zacharin, of Moscow, who was called to attend the Czar Alexander III, who lay dying, was the recipient of a check for $15,000, in addition to all expenses, for two days' attendance.

We may mention here that Sir Astley Cooper practiced five years before his income rose to $500 a year, but it finally amounted to over $100,000 a year. In order to get leisure for study, recreation and travel, Sir Henry Holland limited his professional practice to $2,500 a year.

Let us look for a moment to the fees of our colleagues across the water. In Paris there are

2,600 physicians. Of these, 40 earn from $40,000 to $60,000 a year; 50 earn $20,000; 50 from $10,000 to $20,000; 200 from $6,000 to $10,000; 200 from $4,000 to $6,000; while 1700 earn on an average $600. In the whole of France there are 16,000 practitioners whose average professional earnings are less than $600 per year.

From statistics issued recently by the *Aertzlicher Central-Anzeiger*, it is shown that in Germany there is one physician to every 1,850 persons. The population has grown at the rate of 11½ per cent., but the physicians have multiplied at the rate of 63 per cent. For every 500 physicians who die yearly, there are 1,350 yearly graduated. Half of the physicians and surgeons in the German Empire earn a yearly income of less than 3,000 marks ($714). The average fee for the ordinary professional visits in Germany is never more than 50 cents, and is more apt to be 25 or 30 cents, even in the cities. In Berlin there are well-equipped physicians who manage to live on a yearly income as low as $200.

In Austria the condition of physicians is bad. A recent article in the Vienna New Free Press

says: "The number of unemployed or scarcely employed physicians is shocking, especially in the larger cities, and this does not apply alone to the younger men. In vain do they struggle to make a decent living. They look with envy up to their professional brothers who, in spite of the best qualifications, the finest training, in spite of "good luck," are only able to make enough to support their families in a very modest manner, and are unable to provide for their own old age and the future of their family. The number of those who, through adverse circumstances, are excluded from professional employment worthy of the name, and hence are steadily sinking to the level of proletarianism, are increasing year by year. This is owing to a large degree to the Austrian insurance law, which enables any person who belongs to an insurance company to have the "company doctor." Thousands of well-to-do persons with an income far exceeding that of the average physician belong to these companies and receive free treatment when sick. The companies pay the physician six cents for visiting a patient, and three and one-half cents

for office calls. Surely the lives of Austrian physicians are not cast in pleasant places.

The physician in Russia is compelled by law to render services at any time of the day or night for the lawful compensation of fifteen copecks—or seven and one-half cents. However, should the patient see fit, as he often does, not to pay, or pay with insult and abuse, there is no redress for the physician. At this rate it is not at all surprising that fifty per cent. of the practitioners earn not more than 500 roubles ($250) each year, and 15 per cent. from 25 to 100 roubles. Instances of actual starvation are therefore not at all uncommon. In Russia one must study about thirteen years, five of which are spent in the actual study of medicine. In spite of the financial straits in which many of them find themselves, cases of breach of professional ethics, among members of the medical profession, are extremely rare.

CHAPTER III.

QUACKS AND QUACKERY IN AND OUT OF THE PROFESSION.

The history of quackery would be the history of the human race in all ages and in all climes. What a history it would show of the sorrow, credulity, and ignorance of the generations that have passed. The only difference between the physician and the charlatan in the earlier history of the world was that the former was a fool and the latter a rogue.

Notwithstanding there are 135,000 regular graduated physicians engaged in ministering to the ills of mankind, irregular practitioners of various sorts monopolize more than half of the medical practice in regard to minor illnesses—the kind that would eventually get well without treatment or in spite of it, and which formerly

contributed no small sum to the average physician's income. People will choose a reputable lawyer to administer their business, or a minister to attend to their spiritual affairs, with judgment and discretion; but they will trust their health and life to the most ignorant pretender. The world is full of speculative philosophers, impracticable theorists, self-inspired prophets, half-baked individuals and visionaries. These are the people who become the most arrant quacks, the hypnotists, osteopaths, clairvoyants, mind curers, imposters, mountebanks and charlatans. They seize upon every passion, frailty, or prejudice of humanity and seek to mold it to their ends. No life is sacred; no risk too dangerous, if the fee is assured.

The laity do not understand honesty; they like to be duped; and so long as there are practitioners willing to dupe them, they will consult the quack and pay him such fees that they are unable and refuse to pay just fees to the honorable practitioner. They are ever ready to put the quack on a level with the thoroughly educated physician, or even above him. There is no limit

to human credulity, especially in matters of health and sickness, and any method of healing that claims to be supernatural in power finds hosts of followers. Hence the million and over of so-called Christian scientists in the United States, a product of ignorance, irreverence, vanity, vulgarity, incoherence and greed. Despite our boastful civilization and refinement, there is in human nature, underlying all the superficial and secondary deposits of teaching and training, a rough, hard layer of superstition, which is continually thrusting its unsightly angles and asperities to sight, and a credulity, which ignoring the more rational methods of cure, is forever on the lookout for wonder-works and miracles.

Owing to a lack of brains or money, or both, which would enable a man to go through a regular medical school, there are thousands of persons at this moment attempting to gain a livlihood in the profession without the possession of any legal qualifications whatever. In every town of any size in this country, educated, legally qualified physicians have to combat with these

ignoramuses, their feelings outraged, and their intelligence ignored. A premium seems offered to rank knavery, and a prize offered to ignorant cunning. Upon all subjects of a medical nature it is remarkable how easily even educated and intelligent persons are tricked, misled, cheated, plundered and deceived by the most shallow frauds and palpable imposters. If the public was not so easily gulled, these quacks, charlatans, and scoundrels would very soon disappear. Since the State medical laws have been enforced all quacks, pretenders and charlatans have had a legal recognition, for when the laws were first enacted every one at that time practicing medicine was enrolled. The medical schools for years were sending out annually thousands of ill-educated and unfit persons to practice, to prey upon the community, and those who were proficient in the science and art of medicine were deprived of their just deserts by those who under the cover of a cheap diploma, or of no diploma at all, made up in audacity what they lacked in education and accomplishments.

A good deal of the pretence and humbug with

which medical practice has been associated in the past has been forced upon the practitioners by the demands of unreasoning people. The laity carry the idea that for every illness, ache and pain, there exists a specific remedy, and that it is the duty of the physician to prescribe this, and as the demands of the patient have been hopelessly beyond any powers of supply, the deficiency has been furnished by the products of invention. Says Dr. Kellogg (*Modern Medicine*): "The exaggerated impressions now prevalent in the world in regard to the power of medicine serves only to keep the profession and the public in a false position, to encourage imposters, to augment the number of candidates struggling for employment, to burden and disappoint the community, already overtaxed, to lower the standard of professional character, and to raise empirics to the level of honest and enlightened physicians."

The laity trust the delicate mechanism of their bodies, that wonderful and intricate network of machinery—God's masterpiece of perfection in mechanism—to the rough manipulations and

uncultivated mercies of some presuming quack, who cannot tell the functions of the liver and thoracic duct, nor could give a creditable conjecture whether the œsophagus was an honorary degree or a mill privilege.

Not content to entrust themselves to those who have devoted many years of patient and self-denying labor to acquiring a knowledge of disease and their remedies, the laity rush blindly for relief into the arms of the adventurer, the most ignorant and low-minded pretender, deceived by promises loud in sound, but impossible of fulfillment. The conscientious physician, whose time and means have been freely expended in fitting himself for his honorable and responsible profession, feels it to be a grevious wrong that an intelligent community should permit the impudent pretender to medical skill to move by his side, ostensibly upon the same high errand. If a watch requires repairs, does the owner take it to a blacksmith, or to anyone who will proceed haphazard to its rectification? No; but the public will run mad after "some new thing," and

trust their health and lives to any loud mouthed pretender.

Every good physician detests all mention of himself in the newspapers of an advertising sort; every wise one, though not good, knows the harm it does him; but the quack—and he sometimes is a regular physician—neither wise nor good, runs to the paper with every accident case he gets, and takes every opportunity to get his name before the public. Many self-respecting physicians in the cities definitely and specially notify each one of the local papers that their names, under no circumstances, is ever to appear in print in connection with the sick or injured, without their special permission.

CHAPTER IV.

PATENT MEDICINES.

Fully one-half of the chronic ailments that afflict our communities is the result of the indiscriminate use not only of patent medicines, but excessive drug taking. The wide-spread use of the bromides, chloral hydrat, the synthetic hypnotics and anelgesics in headaches and nervous diseases of all kinds, result in damage to the nervous system far greater in amount than any benefit derived. Those persons who make a practice of irritating their systems with the thousand and one nostrums recommended in the illustrated magazines, family weeklies and dailies, and the religious journals, are paying heavy penalties in physical, mental and moral de-

cadence. The use of patent medicines causes a good majority of the troubles which physicians are called upon to treat.

Any person who manufactures a secret remedy for the removal of disease in its various forms, without knowing the climate in which a person may live, his color, habits, age, sex, temperament, peculiarities, heredity, etc., is a dangerous quack, and his deceptions show him to be an impostor, and his patent nostrums are degrading alike to humanity and the profession of medicine. The druggist for the little profit arising from the sale of patent medicines, not only wrongs the physician, but encourages the superstition of the patient that he is getting a valuable remedy, and the latter takes many bottles without any advantage to himself but with good profits for the manufacturers. No person would pay a dollar for a solution of Epsom salts colored with caramel and guaranteed to heal all the ills to which the human flesh is heir, if he knew what he was doing; he buys the salts for a nickel, but he would likely consult a physician before buying it. Nearly all the patent medicines are valueless

medicinally, and the only thing that causes them to be at all curative is the influence they have on the mind of the individual—suggestive expectation—with possibly the assistance of alcohol or morphine which the great majority contain.

Ill-judged medication may produce fevers, headaches, delirium, sleeplessness, cough, dypnœa, loss of appetite and indigestion, great or fatal weakness of the heart, the typhoid condition, vomiting, purging, general prostration, sweating, delusions, hallucinations, vertigo, etc. It is said that the reason why more people do not die from the hands of quacks and the dosing with patent medicines is, that "The Almighty is kind to fools."

Dr. Robin, in a paper read before the Philadelphia College of Pharmacy, said that patent medicines demoralize the people by engendering constant dread of diseases, so-called pathophobia. Dr. Robin told how a much vaunted remedy sold at $1.00 a box was compounded of granulated sugar; how certain opium cures contain morphine; and tonics recommended for inebriates are largely made up of alcohol.

The sale of vile nostrums, largely advertised in newspapers is simply enormous. It is openly boasted that the sales of one article alone are over one million bottles annually, and it is nothing but a bad concoction of worse ingredients, which, if it had not been liberally advertised, would never have reached the sale of a dozen bottles a year. The fortunes built up by successful patent medicine concerns are simply enormous. A cheap emulsion of cod-liver oil, which any druggist can make of warranted ingredients, has brought its owners an immense fortune. A sarsaparilla, costing to make less than fifteen cents a bottle, and utterly useless, has brought a fortune to its owners.

Some manufacturers expend hundreds of thousands of dollars for advertising alone. All this the sick people pay in the vain hope of finding a cure for their ills. It is well known to those who have experience in advertising secret nostrums to the public that the contents of the bottle has really very little to do with the success of the business. The secret of success is, to a very great degree, in the advertising. The fact

that one does spend a great deal of money in building up such a business should merit a term in the penitentiary.

The patent medicine business is founded upon human credulity. It is cruelty to speculate upon the necessities of the sick; to pillage those who have the strongest claim to our sympathy by abusing their confidence; and still more, it is to trifle with health and life by inducing the afflicted to postpone the use of rational means of cure, until their diseases become more formidable, perhaps intractible.

What shall we say of the newspaper press which places these vile nostrums before the public? Of a newspaper press which sells its columns for public announcements in unmistakable terms, of offers to perpetrate crimes which strike at the root of society, which undermines public health, which corrupt social morals, which degrades our manners below Herculaneum and Pompeii, and sink them to a level with Sodom? The positive filth and pollution which is daily sent to our homes under the guise of respectable newspapers, is an insult to the wives

and daughters of every home they enter. For instance, and this is not the worst of the advertisements, we see advertised "——Pills, Ladies who are pregnant are warned not to use these pills, as they may do them grave injury. At other times they can be taken without harm." It is a redeeming fact that most of the abortifacient medicines for the relief of suffering women are in fact harmless and inert, so that their proprietors are guilty of no greater crime than lying, and their newspaper friends of no greater offense than of distributing lies.

The newspapers in their advertising columns, teem with fresh notices of these pretenders, and "new cures" are continually palmed upon public credulity. Wholesale testimonials from people who either never existed, or whose previous decease had been ascertained—certificates of cure from persons in distant parts of the country, who very likely have never heard of the quack compound, for whose efficacy they are made to vouch. In every soul—especially the little ones—there is a craving for notoriety. This is why we see so many portraits of clergymen, senators,

congressmen, and the lesser few, published in newspapers as having been cured by some nasty patent medicine. Many of the faces carry an expression as though the owner had swallowed a cherry pit and didn't know what to do with it.

The religious press sell column after column to the manufacturers and vendors of patent and secret combinations of drugs and poisons, which are either frauds in their nature and intent, or the vehicles of concealed but powerful elements, whose applicability can only occur in fortuitous and occasional coincidences between remedy and disease, while too frequently they subserve the purpose of vicious indulgences, in comparison with which ordinary whiskey drinking is a prudent, praiseworthy, wholesome, and highly moral practice. Such an illustration of the power of avarice and the stupidity and short-sightedness of temporary self-interest and brazen contempt for justice, principle, public decency, and personal honor, by pandering to vices in one column which they denounce in another, and both alike for money, is certainly not a good example of twentieth century civilization.

Inefficiency and consequent lack of confidence in the profession is the chief cause for the use of patent and self-prescribed medicines. This lack of confidence in the medical profession is amply shown by Dr. McClintock, who said that drugs were purchased after physicians' prescriptions to to the amount of ten million dollars within a year, where 160 million dollars worth were bought directly by the public. The profession is in a measure to blame for this enormous and demoralizing traffic, in not educating the public in the evils of the practice of promiscuous dosing of any character, especially when the ingredients are unknown to any one save the manufacturer. A good deal of the "health-hints" and pseudo science published in the newspapers is detrimental. Theoretical absurdities, no matter how inconsistent, are preserved and additions made by the least informed in the profession. For instance, to-day we find the most absurd theories existing concerning the effects of uric acid, until now the laity have caught on to "uric acid poisoning," and are ready to take any nostrum advertised to "cure it."

The indiscriminate prescribing of proprietary and other pharmaceutical preparations, especially ready-made tablets, often lead the laity to think that physicians prescribe ready-made and patent preparations, and therefore they think that they can buy the preparations themselves and thus save the physician's fee. With the fad of tablet treatment necessarily comes the use of the disease label in place of the careful analysis of symptoms. It is certainly of benefit to the prescribing druggist as well as very useful to the lazy and slipshod physician. With machine-made medicines which are constantly thrust upon the physician by manufacturing pharmacists, he is tempted to give medicine too often, too many kinds, and too much medicine, and he is very apt to forget those principles of treatment that experience has proven to be sound and practicable.

Lazy physicians welcome the literature which is sent out in such vast amounts by the innumerable pharmacal companies, who are self constituted advisers in the treatment of disease about which they know nothing. Our offices are

flooded with literature extolling the merits of some preparation, accompanied frequently with certificates, used by permission, from physicians who call themselves reputable. As Dr. Witherspoon says: "These drug houses are so afraid that someone will die through your ignorance that they send a man, frequently a doctor who was a howling success before his health failed, to tell you all about how to treat disease, with the parting injunction to always specify his preparations, and the friendly warning to watch the local druggist. They are the only people in the world who, without seeing the patient, can tell you how to feed the baby until he blossoms like the rose, or to restore the bloom of health to the blanched cheek of the convalescent. Or they make the emaciated consumptive so fat he can hibernate and convert his distressing cough into a laugh of joy."

During the past fifteen years between 3,000 and 4,000 newer remedies, synthetic and proprietary, have been placed before the medical profession and the general public, and when we consider that they are still crowding in upon us

with no apparent abatement in sight, the outlook is anything but encouraging. The art of title coining is rapidly developing into a profession. These synthetic drugs are not the crude products of Mother Nature, but are mainly the inventions of the chemist, and they are duly labeled in a peculiar chemical jargon accompanied by a caravan of symbols supposed to represent the exact molecular and atomic composition of the substance, and which no doubt duly impresses the average physician.

Current medical literature is filled with the claims of many new remedies, and for the most part these claims are based upon purely empirical employment. The merits of a therapeutic agent can only be determined by the collective investigations of chemists, pharmacists, physiologists, biologists and clinicians. These observations must be conducted under varying conditions of environment both as to the product and patient. Many years of time are required. The scientific demands of our profession ought in no way to sanction this "hit or miss" method of treatment. Much of the so-called "therapeutic nihilism"

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represents the ignorance of the great mass of the profession upon the physiological action of drugs. The man who proclaims himself a medical nihilist we naturally think has a fit of dyspepsia which interferes with clear thinking and has rendered him pessimistic. Says Professor Abel of the Johns Hopkins University, "It must be confessed that the therapeutic nihilist who uses only what is indispensable among drugs, but who is wise in the curative power of air, water, food, rest and exercise, will have less to answer for in the final reckoning than his drug-enslaved colleague who prates of controlling disease in its every symptom with this or that panacea, and who is guilty of the premature application to practice of what are only unproved theories."

At present the medical profession as a whole is in a sad state of ignorance upon many elemental facts of pharmacology. Shot-gun prescribing, on the principle that if one ingredient misses, another may hit, is but the assertion of the ignoramus or imbecile, and is irrational and wrong, crude and unscientific, and in many cases undoubtedly harmful. No man can be a really

capable physician who does not know all that is known of the action of each drug which he uses upon every organ and function of the body. We once saw a prescription containing eight ingredients. At the bottom the physician had written for the instruction of the druggist, "If any of these things don't mix, just leave it out." With the average physician the practice of medicine never advances beyond the power and limitations of cathartics, anodynes, and stimulants. The physician who relies upon calomel, quinine, opium, strychnine and ammonia, is practising in the twilight of a past century. Blue pill, podphyllin, and so on are still given as in times past, for the purpose of "touching the liver," and so still perpetuate the idea that certain remedies go for the liver and increase its various secretions. The highest ambition of too many doctors is to be able to administer salts, or use a hypodermic of morphia, and the idea of making any material advance in the various departments of medicine or the collateral sciences would seem as visionary as a proposition to construct a railroad to the moon.

Physicians are too much given to perpetuating impotent and even harmful methods that come to us with no other sanction than that which time can give. Tonics and bitters owe their virtues more to the alcohol which irritates the gastric mucous membranes rather than the bitter in the mixture. There is no warrant that tannic acid will produce styptic or hemostatic effects upon remote organs. Lithium is a drug to which much false impression exists, and few drugs have been so recklessly given, to accomplish the most varied purposes, as has potassium iodide. Creosote and its allies show antagonism to bacilli, but boric acid has so little disinfecting power that for practical purposes it must be disregarded entirely. Because thyroid extract was found to benefit myxedema and allied conditions, almost all the organs, from the testicle to the brain, are dried, powdered, extracted and transformed into testins, neurions, nucleins, ovarins, cardins, etc., and are foisted upon the physician. But we might write a book on this subject.

The fostering of the innumerable pharmacal establishments, which work solely for the pockets

of the owner, is a disgrace to honorable medicine. A case can no longer be treated upon its merit, and a physician ceases to formulate his own prescriptions to suit each case.

CHAPTER V.

WHY THE MEDICAL PROFESSION IS OVERCROWDED.

Leading members of the medical profession have deprecated the crudeness of the common professional knowledge. It is well known that the profession in the United States has not possessed the wide extent of knowledge, those high scientific attainments and general weight of character which is found abroad. It takes more brains and application to be a really good and successful physician than to win laurels in any other profession. If a young man is capable mentally of gaining prominence in medicine, he would probably do much better in any other profession. The ill-prepared lawyer or minister can do comparatively little harm, but the ill-prepared

physician, because of the public's lack of technical knowledge which would enable it to judge of his ability, may be as great an evil in a community as an epidemic, and still go undetected and unrestrained. Men often mistake their calling and become misplaced in society—a round peg in a square hole. It is never worth while to try to make a Sands, a Loomis, a Flint, or a Gross out of a boy whom nature designed only for carrying a hod or intended for a horse jockey. A good mechanic has often been spoiled in making a very poor physician, or a very respectable farmer transferred into a stick in the pulpit.

Without intellectual training, a man is not fit for a legislator, or a judge, or a justice of the peace, an author, an editor, or a schoolmaster, a lawyer, a minister, a missionary, and how much less for a physician. And yet thousands of young men spring into the arena, already crowded to suffocation, untutored, unlearned, uncultivated, and in a swarming host infest our land with their stupidity or knavery. They are neither desirable from the standpoint of intelligence nor pleasant associates from the standpoint of personal char-

acter. They help to make the medical profession of to-day appear in the eyes of the public as resembling a diluted or rather unreliable mixture. Many would-be students of medicine are utterly illiterate. They cannot pass the simplest rudimentary examination, and to them medicine is a study entirely beyond comprehension. Yet with the aid of tutors and friendly professors they crowd themselves into the profession.

At a recent State examination, a student who had passed his examinations and had graduated from a reputable medical school, in reply to the question, "Describe the pathological characteristics of common hepatic cirrhosis," wrote, "The parinchamy of the liver becomes contracted, the connective tissue contracts and obstructs the circulation, the connective tissue left in elevations and depressions." Another candidate wrote: "There are five events in an artery and the seat of enteretis, viz: (1) retraction (2) contraction (3) blood cloth outside (4) blood cloth inside (5) and resolution; during the time when the artery is efected & etentes inflamation of the joint ther is redness swelling pain ther is the joint is

stif." Another candidate in reply to the question: "Name the special types of food essential for the supply and maintenance of heat force and bodily weight, and give the physiological reasons for each," wrote "Bread and butter, beef steak, eggs, potatos, fish and all the fatty articles of food which enter into making blood and muscle." As an examiner said: "It is literally horrible to behold these vapid and chaotic minds agonizingly and blindly cudgeling their wits in an attempt to use the tools of science of which they have not grasped the merest rudiments. Out of very pity such cruelty should not be permitted." It was one of these half-baked individuals who was asked "what is the dose of hydrocyanic acid," replied "About a teaspoonful." A quarter of an hour later he came back to the professor and said: "Professor, I'd like to correct that dose." "Too late," replied the professor, "patient's been dead fifteen minutes."

It is from this class that quackery is so often peering out from under cover of the profession, for ignorance is the proper *nidus* of quackery. Many a life which could have been saved is sacri-

ficed on the altar of medical incompetency and ignorance. Yet every year crowds of green graduates are turned out, invested with all the dignity of the doctorate, and privileged to prescribe for the sick, but who have not one moral or intellectual qualification for the work before them. No young man should be encouraged to take up the study of medicine unless he possesses natural qualifications of an exceptionally high order. Ex-President Gilman of the Johns Hopkins University, says: "In no one of the professions is preliminary training more important than it is in medicine. The physician indeed should be a man of liberal culture, he must also be a man of technical skill, and that technical skill can only be acquired by habits of close observation, by a knowledge of the physical and chemical laws of nature, by familiarity with the forms and functions of plants and the lower animals. Probably the most remarkable advances in higher education within the last twenty-five years are to be found in medicine. Still greater advances are already in sight."

It is nothing short of a crime to encourage a

young man to take up the study of medicine, the most arduous and exacting of all the professions, who lacks the qualifications and requirements for a first-classphysician. Says Dr. Madden, (*American Medicine*), "By holding out inducements of various kinds to prospective medical students, by making both entrance and exit easy, thousands are led to take up the work of the physician and surgeon instead of seeking other occupations for which they are more fit, and in which their reward must be much greater. Already overcrowded, already yielding a smaller reward than the same efforts would command in almost any other calling, the schools are filling the medical ranks with a horde of competing, struggling, generally poverty-sticken young men who, in attempting to practice medicine, lead lives of miserable anxiety, while, in the industrial ranks from which they are generally recruited they might at least earn a modest, life-sustaining competence. When we speak of the medical college student ranks being recruited largely from men, young and middle-aged, heretofore engaged in some form of manual labor, we speak with a definite knowledge

on that subject. Cigarmakers, barbers, coachmen, carpenters and janitors have all been seized with a desire for the honorable occupation of curing bodily ills, or a less laudable desire, as in case of an honest grocer, of escaping the drudgery which his former occupation entailed." The grocer referred to told Dr. Madden, that he had kept a grocery store. "Have kep' one a long time, but it's hard work. I have to get up at four o'clock in the summer and do heavy liftin', and I haint very well. I thought I could be a doctor and wouldn't have to work so hard." He was forty-three years old, and not having much schooling, he was complaining that he did not understand the lectures.

A young man with a poor preliminary education, and consequently of loose and desultory mental habits, must necessarily have ideas weak, disjointed, and inconsistent. He has no power of observing and generalizing—in many instances he cannot spell, and cannot put down his thoughts intelligently in writing—in short he evidences in every way great imperfections of mental development.

Such a young man takes his seat on the benches of a medical school and the professors proceed to charge the storage battery of his mind with a knowledge of the medical sciences. This interesting process of intellectual saturation is continued daily for three successive periods of five or six months, listening to five or six lectures a day on anatomy, in all its various branches, as descriptive, topographical, pathological, microscopic and comparative; chemistry, organic and inorganic; toxicology, physiology, and histology, materia medica, pharmacy and botany, surgery in all its branches, institutes of medicine, general and special pathology and diagnosis, obstetrics, gynecology, the diseases of children, psychological medicine and medical jurisprudence; to which may be added clinical instruction in practice, surgery and obstetrics. The undergraduate vessel is then declared to be full, up to the brim and running over, and a diploma is awarded him, and he is sent out to cure the halt, the sick, the lame, and the blind.

Anatomy, with all its complicated details and intricate branches, is lost to him. Physiology,

with its prescient reasonings, deep reflections, and extended investigations, is beyond his comprehension. Chemistry, with its latest marvels, splendid discoveries, and increasing influence, is too difficult a science for his puny conceptions. He never purchases new medical books, and rarely reads a medical journal. But he is fully aware that calomel "is good for the liver," and quinine is good to give at all times.

With such a mental cramming without any reference to their powers of assimilation, what wonder then, if the untrained minds of young men become enfeebled. A student receives each year more technical instruction than he can digest in ten. No wonder he gets a mental dyspepsia, which often will stay by him for years, in fact some never get cured of it. No wonder that the Regents of the State of New York declined to license over one thousand applicants, graduates in medicine, during the past six years, for the reason that their markings fell below the required seventy-five per cent. The Missouri Board, on April 2, at Kansas City, and on April 15 and May 8, at St. Louis, examined 221 applicants for li-

cense, of whom 118 passed 75 per cent., and 103 failed. But before the State examinations thousands of young men have entered professional life. They become mere medicine men, who share the glory of an old woman as accoucheur, often act the charlatan, and are a disgrace to the profession. We have all met with them. Superficial, egotistical, conceited, presumptous and rash, able to diagnose more rare diseases in a small town in a few months than Europe and America combined have seen in years. If one removes a wen from a patient's head he manages to get his name in the papers as having performed a dangerous and delicate operation. These men usually "know it all." They are usually illiterate, have no use for books and journals. They never make a mistake, and consider themselves the sum total of all medical knowledge. They are usually braggarts and are always boasting of the cures of desperate cases they have made. Like the river Amazon, they are largest at the mouth. Their ridiculous talk is often taken as the essence of wisdom. The sweetest music to the egotist is when he blows his own horn.

It is with this class of physicians that there is constant quarreling, bickering and backbiting, which is simply disgusting, and serves to make the public lose faith in all physicians. These men generally stand at the bottom of the ladder watching others climb, are too often engaged in their more or less vindictive manner, in trying to pull them back. If these half-baked individuals, the disgrace to the profession, would only have brains sufficient to try and find out the cause of their own failure, and rectifying it, instead of impugning the motives and methods of their more succesful brother practitioners, it would be much better for the profession, and would not serve to belittle the whole profession in the eyes of the public.

Superficial doctors are very poor physicians, and are always conceited. Conceit is always disgusting. Modesty is not only a crown jewel in the female character, but it is no less indispensable to the symmetry and beauty of character in man. As Addison said: "A just and reasonable modesty does not only recommend eloquence but sets off every great talent which

a man can be possessed of. It brightens all the virtues which it accompanies." Some men are over modest; they have to die in order to head a procession. But modesty is always in place. The man who keeps still when he has nothing to say, is a public benefactor.

We occasionally see bright young men, however, of great mental ability, but unfortunately of a poor preliminary education, who learn a great deal by observation. They have faith, industry, acquire skill, perseverance and grit, and by assidious application they make some of our best physicians and surgeons. It is not the mere knowledge of Latin or Greek, or the higher mathematics that make a college graduate a better physician. But his four years in college has taught him the value of mental discipline, and this is the great central idea of education, and the chief and proper end of scholastic training. Knowledge, which is the fruit of study, does not constitute education. But a well trained scholar will carry with him a mind habituated to observe, to compare, to reason; the power of concentration, of fixed and continuous attention, and a

lively and right perception of the beautiful, the pure and the true. These are the real constituents of intellectual education.

The man with a good preliminary education is enabled to prosecute his professional studies with a rapidity, thoroughness and success which is denied to men destitute of a preliminary education, and which would issue in the possession of far more accurate knowledge, more decisive skill, and more trustworthy judgment, than characterizes the general practictioner as usually educated. The educated physician makes deductions, and reasons from well known facts, and knowing the facts, he adopts his treatment and conduct accordingly. To him this philosophy affords a never-failing fountain to which he may resort with confidence and profit in the application of his knowlege to all the varied forms of disease that wastes the human form. The study of medicine without a good preliminary education, is like studying the higher mathematics before one has mastered the multiplication table, or scanning the Odes of Horace before one has learned to conjugate the verb *Amo*.

The public can be protected from incompetent practitioners only by raising the standard of education and by legal barriers to the practice of such. Our best schools are behind those of Europe in time required for graduation and in the character of the course of study. All teachers must know that four years is really too short a period in which to acquire the technical rudiments of medicine. In Europe five or six years are everywhere required. Yet thousands of physicians in this country have acquired all of their knowledge of medicine by sitting six months on benches each year for two years, trying to digest five or six lectures a day, the lecture rooms so thick with tobacco smoke as to stupify the brains of the would-be student.

The serious progress of our American medical education is obstructed by poor teachers everywhere. Many a medical college is the unripe fruit of the morbid ambitions of aspiring "professors." These men hold their positions because they are there and no one can displace them. Of course some of the metropolitan schools have brilliant men who would be an honor to any pro-

fession, but their method of imparting their knowledge by lecturing on subjects to students, probably one-half of whom are unable to comprehend the subject lectured upon, has been a detriment to the profession.

The present four year's course now being adopted by the best schools, with less lecturing and more laboratory and clinical work, is a great step in advance. Harvard and Johns Hopkins in the East and Michigan and Minnesota in the West have magnificent equipment in the way of laboratories and expert teachers, and some of the other schools have begun to fall into line as fast as possible, considering the lack of funds and the often poor equipment of professors and adjunct professors, the latter often selected so that they will not be rivals with the professors, than for great ability.

No medical college has any valid reason for its existence unless it can show two things; first that it is thorougly equipped to give a complete medical education of the most advanced type; second, that its graduates present evidence, in their career as physicians, that they possess the liberal

general education of a scientific man and the thorough training of the modern physician. It is now fully in the hands of State Boards to raise the standard of requirements to a degree that would efficiently exclude all but the best-fitted morally and mentally to practice medicine. With the raised standard the smaller medical colleges would either come up to the requirements or fall victims to their own impotence.

After a long fight, the best medical schools are now insisting upon a preliminary examination (although not as severe as it should be), the four year course, and practical teaching in laboratories and by ward classes. The informal talk illustrated with models and pictures and blackboard drawings and specimens, is replacing the formal lecture, and it is found that the proper place to study medicine is the dead-house, the sick-bed, the dissecting-room, the laboratory and the quiz-room.

CHAPTER VI.

THE REQUIREMENTS OF A SUCCESSFUL PHYSICIAN.

Medicine is a life-long study, and a physician's after success depends upon himself and his ability to cope with the various conditions as they arise. Success comes to the class who pursue their life-work "with all their heart." It is recorded of Hezekiah: "And in every work he began in the service of the house of God and in the law, and in the commandments to seek his God, *he did it with all his heart and prospered.*" Longfellow said: "The talent of success is nothing more than doing what you can do well, without a thought of fame."

One physician calls himself successful because he has a fat bank account, although the graveyard may cover a good many of his sins of omis-

sion and commission. Another calls himself successful because he has "pulled through" a good many desperate cases of pneumonia, typhoid fever, etc., while he is so poor he cannot afford to take a medical journal, let alone buying a medical book, and he finds it hard work to pay his rent and grocery bills. The successful physician, however, is one who is well trained in all departments of medicine and surgery, and who can give the best possible service with the latest advancements in medical and surgical science, and earns a comfortable livelihood.

Says Dr. George F. Shrady: "The great doctor is greater than ever, especially in the field of research and discovery; but the average doctor is a smaller personage than he ever was before, and that is why the profession seems to have declined and lost many of its old time attractions for educated men. An ordinary pill purveyor and diagnoser will soon be regarded with no more reverence than the man who sells the pills. On the dead level, the profession is overcrowded, badly paid, and has lost much of the old-time homage of society. I would say to the young fellow who

may be graduated to-day, if he has not a great capital of enthusiasm and energy, and if he loves money, there is more reason now than ever before that he should let this profession alone. The title M. D., *per se*, is of no special merit. On the other hand, the surgeon who takes out the stomach of a man dying of cancer and preserves his life, or the observer who defines and destroys the microbe of yellow fever, is ranked with the masters and miracle workers. Climb to the summit or keep shop."

Unfortunately, all men are not made alike. Each human being is naturally endowed with certain faculties; with one or two, or five or ten talents. In the New Testament parable all the faithful servants, in proportion to what they severally received, increased the amount entrusted to them. The unfaithful servant, on the contrary, gained nothing. Every one who diligently and faithfully cultivates such powers as Providence has blessed him with, finds them becoming ever more effective; feels himself continually growing richer in capacity to know, to do, and to enjoy. Those on the contrary, who are neglect-

ful and wasting to themselves, discover after a time that they are deteriorating, becoming less and less capable of doing anything useful, honorable or good. In other words, they become a back number. Life with them has degenerated into a mere mechanical routine, a tread-mill, in which there is the toil of motion, but no progress.

No man in the medical profession should rest satisfied with present attainments, or allow himself to settle down in a mere routine course of study and practice. The well-equipped student who enters the study of medicine after a thorough course of study, including laboratory work in chemistry, physics, botany, zoology, and comparative anatomy, already has the ability to observe accurately and to draw conclusions from his observations that is certain to give him a great advantage over his fellow student who has not had such training.

Of course there are many bright lights in medicine and surgery who have forged ahead to the front despite the heavy handicap of defective education and training. But they have been men of inherent ability, tact, integrity, devoted to their

profession, and with some common sense. Common sense is the most uncommon kind of sense. We have seen well-educated physicians make a lamentable failure for the lack of it. Common sense adapts men to circumstances, and makes them equal to the occasion. Some one has said: "More men of ordinary than extraordinary ability possess common sense." Good common sense combined with diligence and hard study, courage and steady labor, has made successful practitioners whose early education was deficient. A writer in *Medical Brief* says: "It is impossible to make a good doctor of a man who has not got what is known as common sense. He may be ever so learned in the opinions of others, able to quote this, that and the other authority, but without common sense he will not know how to value knowledge correctly or to work out its application skillfully. A man may possess an enormous amount of abstract information, be a perfect walking encyclopedia, but without common sense he is a poor doctor, and sad is the case of those who must depend upon him. Common sense is the basis of judgment, the in-

spiration of correct action, without which no man can hope to succeed as a physician." The average of men are gifted with very moderate powers. Talent, in the strict sense of the word, belongs to very few.

As we have remarked, it is very easy to point to very many men who have been eminent in our profession without the assistance of a liberal education. We honor these men not the less, but rather the more. Many of these men have a cultivated mind, broad intellect, and high moral sense, and would be an honor to any profession. Huxley suffered from the deficiencies of his early education, but he realized this so fully, and devoted himself so assiduously and so successfully to the remedy of these defects, that he became a man of wide cultivation, not only in science, but in literature, languages, philosophy, metaphysics, history, and even theology, to all of which he added the advantages of a fine literary style. Very few men succeed in the practice of medicine until they are past thirty, and the years before thirty can well be devoted to education in the widest sense of the term. With so much to

learn, the young physician should never be idle. While he is waiting for patients he can post himself thoroughly in the use of the microscope, he can familiarize himself with botany and chemistry, and he can acquire one or two of the modern languages. An idle man is slothful, indolent, and sluggish. He is a brother to the useless drone in the proverb. He will never make a successful physician. Says Spurgeon, "Idle men are common enough, and grow without planting; but the quantity of wit among seven acres of them would never pay for raking. Nothing is needed to prove this but their name and their character; if they were not fools, they could not be idlers."

Dr. Holland said that the success of a professional man depends upon the way he uses the first ten years after he enters a profession. If this is used mainly in close and systematic study with the best possible use of the experience that comes to him at that time, it is very probable that during these first ten years he will lay the foundation for success in his profession. Above all, the devotion to study thus early acquired,

will prove a benefit and pleasure if followed up through life. The writer, when working sixteen hours or more a day, very rarely allowed a day to pass without spending at least an hour in good and instructive reading in all departments of literature, and this has been one of the greatest pleasures of his life. Good reading has made scholars, philosophers and statesmen; but worthless reading never made a decent man. The greatest minds are not created by over-much reading, but by judicious reading and close thinking, and proper assimilation of the information thus acquired. Nearly a hundred years ago a well-known physician wrote, "Physic requires more industry, pains and labor, and, indeed, more learning, a more extended knowledge of the auxiliary sciences to carry it to perfection than any other profession."

The physician who fails to recognize and appreciate the important relations sustained to the development of medicine by physics, chemistry, botany, microscopy, bacteriology, pharmacology, and other branches of science, immeasurably limits his knowledge, his opportunities and his

conception of the scope of his chosen field of labor. The country doctor especially will not only derive great benefit from the study of botany, but in the study will find a source of unfailing pleasure. In no other department of science do the same facilities occur for complying with all the conditions of inductive philosophy — namely, observation, comparison, classification, and generalization. The microscope not only introduces us to a new world, revealing minute organisms that play a great part in the plan of nature, but it shows us how they are largely concerned in the production of disease. So much does the microscope constitute a necessary means of research, it is impossible for the conscientious physician to practice medicine intelligently without its aid, and yet not one in a thousand physicians are familiar with its use as a means of diagnosis.

Every physician who has striven to conscientiously fulfill the duties of his profession towards those who have committed themselves to his care, has had his mind thoroughly impressed with a sense of his need of all the assistance he

could possibly derive from the whole round of science and literature, both ancient and modern. The study of the physical sciences particularly should attract the attention of every physician, for there is no study which so quickens and cultivates directly the faculty of observation, which in so many physicians lies almost dormant through life, the power of rapid and accurate generalization, and the mental habit of method and arrangement; it accustoms the physician to trace the sequence of cause and effect, and his mind becomes attuned to a close application, his thoughts more supple and pliant, while his feelings appear, as it were, purified and refined by a higher appreciation of the great truths of science. The great defect in our system of education is the neglect of the educating of the observing powers—a very distinct matter, be it noted, from scientific and industrial instruction.

The mind of the physician should not only be stored with various and extended knowledge in his own and kindred sciences—his perceptions should not only be quick, and clear, and accurate, but his higher faculties of analyzing, comparing,

judging, should be educated and perfected to the greatest possible extent, for there is no profession in which strength, accuracy, and in a special manner, readiness of judgment, are more essential than in our own. A physician is old when he ceases to progress. Just as soon as a man arrives at the point where he is content with his own individual experience, where he knows it all, and disregards the experience of others, where his whole knowledge of medicine consists in merely giving drugs, to whom medical books and journals are of no use, then he is old regardless of the number of years he has lived.

Schiller, the German poet, wrote, "A physician whose horizon is bounded by a historic knowledge of the human machine, and who can distinguish terminologically and locally the coarser wheels of the intellectual clock-work, may be, perhaps, idolized by the mob, but he will never raise the Hippocratic art above the narrow sphere of a mere bread-winning craft."

Says Dr. A. R. Reed: "A reputation, to be lasting, must not come accidentally, or by trickery, but be based on talent and merit.

Such a reputation is built up little by little—built to endure, and to give one wealth that cannot be wholly represented by the money he earns. It must be a large part of his working capital. The only way to secure it is by firm and persistent reliance on merit."

CHAPTER VII.

NATURE VERSUS DRUGS.

The physician cures few diseases, but, on the other hand, the lawyer cannot write an unbreakable will, and the theologian has failed to obtain any undisputed information concerning the Almighty. No intelligent physician professes to *cure* pneumonia, measles, small-pox, whooping-cough, typhoid fever, or any other disease of a similar character. Under favorable conditions, however, the patient recovers from all these maladies—not, however, by the cure of the disease, but by its disappearance after having run its allotted course. Morphia will cure pain, but it does not remove the cause of the pain. It cures the difficulty, but not the patient. At one time it seemed that the function of the

physician consisted in little else than the prescription or administration of drugs, and the function of the patient in little else than swallowing them. Now, on the contrary, the pendulum has swung very much the other way, and it seems as if the chief function of the physician is to amuse the patient while Nature performs the cure.

Says Dr. Hobart Amory Hall: "Nature often produces her most rapid cures when left alone."

And Dr. Austin Flint said, "we should be content with doing nothing when ignorant how to do good;" and again he says, "the severity of the disease and the danger of the patient, be they ever so great, do not alone constitute grounds for active measures."

One of the greatest sources of error lies in the fact that nearly all, if not all, diseases tend to run a certain course, which varies within certain limits, according to the intrinsic severity of the attack, the patient's constitutional peculiarities, and the influences to which he is exposed during his illness; which tends (as the case may be) towards convalescence, towards relief, towards per-

manent improvement of health, or towards death; but which is yet, in the main, typical for each disease. The great neuroses, like locomotor ataxia, paretic dementia, multiple cerebral sclerosis, etc., have periods of remission during which the patient seems, to the average observer, to have regained his former health. Many of these remissions are called "cures" by the advertising specialists, Christian Scientists, etc. Pathology teaches us the stern facts that many morbid conditions are out of the pale of therapeutic control. A careful watching of the effects of nature herself under disease, unaided by medicines, has shown how powerful is the *vis medicatrix*.

Disease consists of obstructed vital action plus the efforts of the vital system to avoid and remove the obstructions, and heal the lesions. Disease is often nature's process of cure. Inflammation, the great representative of all diseased action, is often nature's healing process. That marvellous reparative power which cures a fever or an inflamed lung as thoroughly as it heals a wound or mends a broken bone, must certainly work after a definite plan in each class of cases.

And as conservative surgery has been much advanced by a careful study of nature's method of healing wounds and repairing injuries, so it can scarcely be doubted that a thorough analyses of the more obscure phenomena of internal diseases and an investigation of their physiological sequence and relationship may afford us great assistance in our endeavor to conduct our patients safely through the storm of a dangerous illness. It should be the physician's business to conduct disease to a "favorable termination," and this is best effected by supplying the conditions for good health. Nature does the rest. The idea that the physician's duty is confined to the alleviation of pain and the cure of disease is erroneous. His work should embrace this, but his study and aim should be to prevent disease. He should study causes. The man who says his sole duty is to cure disease, not to bother about the prevention of disease, is a bad physician and a poor citizen.

Improper methods of living is the cause of more than two-thirds of the ailments from which human beings suffer, and makes them, sooner or

later, a victim for the physician, the nurse or the coroner, while the undertaker guarantees, for a suitable compensation, to fashionably attire them for the latest style of casket, and mother earth opens her arms to receive the victims of their own foolishness long ere the time that nature intended. The quantity of food digested determines a man's life. Great eaters are generally short-lived, unless dyspepsia intervens to save them. A wise man has said, lucky is the man whose dyspepsia is manifested in the stomach, where it ought to be, rather than in gout, rheumatism, Bright's disease, and a host of other ailments.

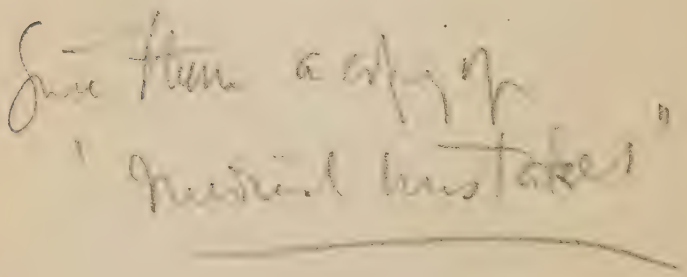
The physician who studies from a hygienic standpoint the cases of those who entrust themselves to his care, and gives judicious advice regarding the regulation of diet, clothing, exercise, conditions of dwelling and habits of life, performs his duty with far greater fidelity to the requirements of his profession, and with more benefit to his patients than when he places his chief reliance in the exhibition of drugs and medicines for the restoration of health. Man is not a chemical cru-

cible for transmitting drugs into life and tissues. He is something more than a diminutive chemical laboratory.

This golden axiom should be observed by all physicians, that it is only the *second* law of therapeutics *to do good*, the *first* law being this—*not to do harm.* Only a physician of long experience knows what to do when there is no occasion for doing anything. In acute diseases it has been demonstrated that too much an ill-judged interference has killed patients, where nature could have saved them if left alone. The chronicles of our art disclose the melancholy truth that the sick man may suffer more from his physician than from his disease. To the ignorant physician and the charlatan disease is a set of symptoms to be attacked by a variety of drugs—a drug for each symptom. To the intelligent physician disease is a life-process of perverted kind.

Drug giving as a function of the physician is rapidly decreasing in importance. It is perfectly safe to state, as a general proposition, that the more exact our knowledge as to the cause of disease, the fewer the remedies we will employ in

treating it. When the physician gives fewer drugs he will understand thoroughly the action of those which he does give, selecting each with that precise judgment which can be obtained only from a more thorough knowledge of disease conditions, and which requires a thorough and exact scientific training. The physician of the future must be better grounded in pharmacology, a subject which is at present almost entirely neglected in our medical schools. A more thorough knowledge of the action of synthetic drugs and of drugs in general, is not only something to be desired, but is absolutely imperative.



CHAPTER VIII.

TO BE SUCCESSFUL, THE PHYSICIAN MUST BE A GOOD DIAGNOSTICIAN.

The object of the scientific physician is to establish the distinction of the disease, in itself and in its consequences, from all the other diseases of the system, and to balance it against the residue of health. His object should be, not to give it a name, but distinguish for the purpose of cure, and therefore in relation to the economy, and to the power by which it may be overcome. In the same way a scientific prognosis is obtained by valuing and calculating the relative powers of the disease and the vital force—by estimating and striking the balance. Here is where the educated physician is far superior to the uneducated one, who for the want of accuracy of obser-

vation, accuracy of comprehension, accuracy of expression, is constantly changing his opinion and his treatment, and can never command the confidence and obedience of his patients. There is nothing more injurious than indecision. It is necessary that the powers of perception and reasoning be fully developed in order to acquire accuracy. It is this want of accuracy that is the cause of the different view taken of the same subject, that permits the existence of opposing schools and sects in medicine, and this largely is the result of variations in the preliminary training before the work of the medical school begins. Just in proportion as one forms the habit of accurate discrimination, close attention and logical reasoning does he gain strength to meet the demands of an intelligent life. To do the right thing at the right time is what counts. The physician is daily called upon to solve original problems, to investigate cases in some degree unlike any other case he has ever met. Self-possession and calmness, and above all, that conviction that he is right, and it is this certitude of conviction which makes the great physician—the

Janeways, the Delafields, the Peppers. It is certitude of conviction that makes the great surgeon, and guides him where to put the knife with unerring accuracy. A disposition to form conclusions from a limited number of facts is a fertile source of error in medical observation. That many of the assumed *facts* in medical science are totally destitute of logical proof, must be allowed by all unbiassed observers; and it cannot but be with at least temporary feelings of regret, that many a man of science has found that the more he learnt, the more apparent became his ignorance.

We therefore wish to impress it upon the mind of the reader, that one of the most essential conditions for the successful treatment of disease is an exact diagnosis, and the more correct the diagnosis the better able the physician is to treat the patient. To discover, and if possible remove, the exciting cause, may sometime suffice for the cure of a disease of a most formidable nature and of obscure pathology. Never prescribe a drug until you are absolutely sure what you are giving it for. A patient comes to the physician with

aphonia. The man who knows it all, who "has seen hundreds of cases just like it," finds a slight congestion, perhaps, of the pharynx, and tells the patient that he or she has "taken cold," and prescribes some drugs which may or may not help the patient. Now loss of voice, more or less complete, may be the result of transient functional nervous derangement; it may be caused by the pressure of an aneurism, or of a cancerous or other tumor upon the pneumogastric nerve or its recurrent branch; it may be the direct result of a simple or malignant tumor within the larynx, or of the swelling or ulceration which results from the various forms of inflammation to which the larynx is liable. For the practical purposes of prognosis and treatment, it is not sufficient to be able to say of a disease that it is laryngitis; we have further to ascertain to which of these large groups of cases it belongs, namely, the catarrhal, the strumous, or the syphilitic form of laryngitis. If the patient has a cough, the careless or inefficient physician can easily compound or prescribe enough chloroform, morphia or codein to silence any cough this side of the grave,

and the patient may be satisfied. But is he always "cured?" Now every cough has a definite cause, though it may be far from the lungs or bronchia, and it is the physician's duty to find the cause, then he can intelligently prescribe. Amenorrhœa, leucorrhœa, dysmenorrhœa, and menorrhagia are in general merely symptoms of many opposite constitutional states; and to look upon or treat them as local diseases is, as a rule, to commit the most pernicious error.

It is absolutely necessary to make a definite diagnosis in all cases of puerperal fever, *i. e.*, it should be determined whether there is a saprophytic or a septic infection present. Under a wrong treatment fully twenty-five per cent. would probably die. It is not necessary alone to recognize a cardiac murmer or a bronchial rale, to find tube casts, or to discover albumen or sugar in the urine if one is not able to understand the fundamental principles of the cause, course and lesions of the disease producing the symptoms.

There are few constitutional disorders which are not simulated by hysteria and neurasthenia. But both produce secondary states of autointox-

ication which give a decided organic semblance to their symptoms. The time will come when a diagnosis of malaria, hysteria, neuralgia or rheumatism will only show the ignorance of the physician. The majority of physicians cannot tell pseudo diphtheria from true diphtheria, except in typical cases. But very few of them are able to use Widal's test in typhoid fever. Actinomycosis and tuberculosis are all the same to a large number of them. All careful diagnosticians recognize that in many instances an accurate diagnosis of lung tuberculosis cannot be made without a microscopic examination of the sputum. Myriads of cases are overlooked in the early stages of tuberculosis, because of the dearth of physical signs which would be readily marked as tuberculosis if the physician had been able to make a sputum examination. In doubtful cases of malarial fever the number is small that can identify the *plasmodium malariæ*, even when present in abundance.

A knowledge of hæmatology enables the physician to detect any form of anæmia and to determine whether it is a type of blood impover-

ishment which can be corrected, or whether it is of the graver or more pernicious form. Yet not one physician in a thousand can estimate the percentage of hemoglobin, or count the erythrocytes and the leucocytes, or estimate the relative volumes of corpuscles and plasma, or make a spectroscopic or bacteriological examination of the blood. How few know that 1-17 of the total amount of hemoglobin in the blood may be destroyed by sulfonal—which is every day prescribed ignorantly — and hematoporphyrenuria often produced by its use.

The well-equipped practitioner of the present day is supposed to be ready at a moment's notice to use tracheotomy, or intubation in cases of suffocation from internal causes; artificial respiration by mechanical means and electrization of the phrenic nerve, transfusion and saline infusions, paracentesis in all cases of pleural, abdominal, cerebrospinal and intradural effusions, herniotomy and operations for the relief of immediate danger occasioned by osteomyelitis and neoplasms.

How necessary, then, ought the well equipped

practitioner of the present day to be able to prepare sputum and examine it for tubercle bacilli, when, with a centrifuge and microscope it can be done in ten minutes. The blood can be obtained and the hemoglobin estimated by the Gower or Dare instrument, in five minutes, and the volume of corpuscles by the hematrokrit in three minutes. Cover-glasses may be spread with blood, fixed, stained and examined in from ten to twenty minutes. The Widal serum reaction of typhoid fever need never take more than thirty minutes, and when pronounced, not more than ten.

In these days of ferments, enzymes, sporozoa, and other ultra microscopical organisms, a physician has got to be up with the times, or else become a back number, contented with his quinine and calomel. A greater familiarity with physiology, hydrotheraphy, massage and gymnastics, and their proper application, will quickly diminish the number of faith healers and osteopaths, and strengthen the confidence of the public in the profession.

Diseases that every family doctor thought he

could tell with but little difficulty are shown to require unusual skill and special training. Treatment that a generation ago was supposed to be almost or quite specific, is now found to be valueless, and the belief in its efficacy is considered as something in the nature of a superstition. We do not now always rely upon the indications of the tongue, the pulse or the temperature, but to the culture-chamber, the microscope, staining-reagents and test tubes.

CHAPTER IX.

THE PHYSICIAN SHOULD BE A GENTLEMAN.

Legitimate medicine does not receive that cordial recognition either in manners, letters, conversation, and the press, which her manifold services to science, religion, the arts, learning, humanity, and true civilization entitle her to expect. In England the social status of the physician is not high, but is somewhat higher in this country, where every man is estimated according to his individual merits. Any physician without brains or principle, if he but have grace of manner, a voluble tongue which he uses with discretion, and taste in dress, will gain a practice in a community sooner than the intelligent and studious man who is uncouth in manner and slovenly in dress. As financial success goes, an agreeable presence is more potent than skill or

brains. Many a practitioner with a good education and fully equipped in every way, and yet by his peculiar physicial and mental make-up, he may either make a failure as a practitioner, or at best, only have a mediocre success. Amos Lawrence wrote: "Good principles, good temper, and good manners, will carry a man through the world much better than he can get along with the absence of either."

The most difficult part of the profession to the young, well-educated physician is the art of inspiring his patients with confidence. The favorable verdict of the public is to be gained not so much by professional attainments as by matters of which the public are competent judges, such as the general information and character of the practitioner, and the esteem which they see him held by his fellow-laborers. To be believed in, a physician must in the first place believe in himself, or look as if he did. An impressive manner and a charming bedside manner are valuable possessions, but antitoxin has a better record in diphtheria. The judicial wig the academic ruffle, the gold-headed cane,

the reflective snuff-box, and the Socratic air still linger with us, and we still talk of "strengthening the lungs," "giving tone to the stomach," and of "poverty of blood," "diminished vitality," etc., all empty verbiage, which the modern physician should do away with.

As I am writing this book I read the following from the editorial in the Columbia University Literary Monthly: "It must be admitted, to state the case mildly, that culture and refinement are desirable in a doctor, and it must further be admitted that the greater part of the students at our medical school (N. Y. College of Physicians and Surgeons) are not only uncultured, but often even uncouth, thus being fundamentally unfit to become the highest type of their profession." This is disgraceful; but it must be admitted that such men in the medical profession are to be found in every community.

The medical profession should present a class of gentlemen, courteous, dignified, and sympathetic, ethical in all their doings, thoroughly considerate of the rights of others, with noble

and generous impulses, earnest in elevating the tone of the profession, increasing its influence, and adding to its resources. If the medical profession was composed of such men, it would stand higher in the estimation of an intelligent community than it does to-day. Medical ethics is not, but should be, taught in every medical school. It is certain that if the medical students are not taught the vital principles of medical justice and equity, they cannot practice them. A gentleman will despise everything that bears the slightest semblance to unfairness or meanness. He will protect the rights of a rival as zealously as those of a friend, and defend his character and reputation with as much cheerfulness as his own. How many men are there to-day in medicine who are not jealous of their brother practitioners, and will in an underhanded manner do everything in their power to injure them?

Physicians can be readily found who are ready to pander to the prejudices of the multitude; to use the most disreputable means for their own advancement, and to detract from a professional

brother without shame or compunction, for the sake of a little ephemeral distinction, or a few dollars and cents. Some will scruple at nothing, however mean, low or contemptible; will practice the most shameless and disreputable arts; will cringe, and fawn, and villify, just as far as their pusillanimity permits them to go, or opportunities present themselves for the cowardly stabs of such miscreants. Oh, yes, we have all met with them. A so-called physician who is either mean spirited, selfish, cruel, unfeeling, obdurate, unteachable, bigoted, profane, or intemperate, may make a horse doctor, but is not fit to be called by the name of physician, much less to enjoy the rewards of patronage. How often do we meet with inflated, supercilious, and pedantic specimens of professional development, always bragging of their success, and telling a good many things that have never been through the formality of happening? It would take a dozen such souls to make a grease spot big enough to fry a clam. They are a disgrace to the profession. Genuine power is generally silent, makes no loud claims, lets it's work speak

for itself, and has less joy in splendor of achievement than sorrow for the ideal that is unattained. Only a narrow-minded, bigoted physician will promise loyalty to an inclusive system which prevents him from keeping pace with the evolution and progress of medical science. His limited sectarian horizon makes him self-conceited and intolerent towards all others who do not worship at the shrine of his particular "ism." What the profession of to-day need is, peace, unity, harmony, co-operation and brotherly love. Practice medicine and not an "ism." Eliminate the unworthy from the ranks, and end the petty feuds of the worthy. Then will come the necessary strength to influence and move the legislative bodies to enact laws which will protect the just claims and interests of the members of the medical profession.

An old doctor, bless his soul, who was one of the salt of the earth, once told the writer, when in his salad days, "Never be gruff or blunt; never snub a patient; always be urbane; be pleasant and polite; never gossip; always main-

tain your dignity; never become too intimate with a patient, yet do not be haughty; remember it is much easier to lose a patient than to gain one." Courtesy is an indispensable passport to success. Its creation and nurture are not dependent upon books of etiquette, dancing masters, or rules of fashionable life. A courteous man must be polite and civil to every one, and if he is a gentleman he will be so. Every gentleman has it within his powers to remain a gentleman by a rigid cultivation and practice of those cardinal virtues which constitute the character of a gentleman, and also by the moral influence of his own principles and actions, good or bad, to exalt or lower himself in his own and the general estimation. Without feelings of kindness, cheerfulness and a benevolent disposition, a physician cannot succeed. Human suffering, from its very nature, excites sympathy and naturally inspires kindness, anxiety for and readiness to afford every possible comfort and relief. Therefore, the true physician is naturally led to cultivate those humane feelings, until they should become a prominent part of his

nature. The physician is called upon to succor the weak, to rebuke the self-indulgent, to sympathize with the trouble-stricken; to correct morbid views of life and duty, to cheer the despairing, and where hope is no longer possible to smooth the way through the dark valley with such comfort and consolation as only he who is both wise and good can administer. A sympathetic nature is an absolute necessity. The sick feel a need for sympathy and the judicious expression of sympathy shown not only in words, but in manner, tone of voice and action, will exert a favorable influence, not only upon the mind but upon the general condition and the diseased process itself.

It is essential that the physician possess a high moral character. Without that he cannot meet the demands of his profession, nor satisfy the just claims of those who commit health and life to his keeping. Sound moral principle ever refuses to be the slave of impulse, or passion, or expediency. A physician should furnish in his own life a divine exemplification of the blessings of total abstinence. How can a physician

whose brain is clouded by alcohol rightly attend to his manifold duties? Where is the cool head, the calculating and discriminating perception? Where is the steady hand, whose offices should be dictated by the decisions of judgment, and moved by the impulse of duty? They are not in the possession of a drunken physician, or a physician who indulges freely in the intoxicating glass without signs of inebriation. For how can the poisoned administer to those who have taken poison? Can the blind lead the blind? No. The leaders must finally fall into the ditch, and the patient into the grave.

Bulwer says; "To the true physician there is an inexpressible sanctity in the sick chamber. At its threshold the mere human passions quit their hold on his heart. . . . . The grief permitted to others must be put aside. He must enter the room with a calm intelligence. He is disabled for his mission if he suffers ought to obscure the keen, quiet glance of his science. Age or youth, beauty or deformity, ignorance or guilt, merge their distinction in one common attribute, human suffering appealing to human

skill. Woe to the household in which the trusted healer feels not on his conscience the solemn obligations of his glorious art."

But it takes the patience of a saint. Patients are an exasperating pack, and need an immense amount of tact, or diplomacy in the handling. Physicians often meet with ingratitude where they expected kindness, and are treated with contumely where they expected esteem, and although they have at least the reward of an approving conscience, it often requires the patience of Job. However eagerly and peremptorily the physician may be summoned when his presence seems to be a necessity, he is liable at any moment to be dismissed, to find himself supplanted, to have his best endeavors forgotten, or even misunderstood, and turned to his disadvantage. It is the experience of every physician, that some of the strongest evidence of ingratitude comes from some of those upon whom he has conferred the highest favors, perhaps those which are entirely gratuitous. Individuals may think and speak highly of individuals in the profession; every one thinks his own doctor is

the best, at least for the time being; but the good-will and praise, even of one's own patients is so commonly good-will at the expense of all the rest of the profession, that no one whose heart is in the right place can feel it otherwise than as a professional grievance to be thus exalted. The sensitive young physician is apt often to be as despondent as the seventh chapter of Romans. He is a happy man who has the faculty of looking on the bright side of things. If there appears to be no bright side, then he must polish up the dark side. To no one is a cheerful and hopeful nature so fine a stock in trade as to a physician. All beginnings are hard—as the thief said who began by stealing an anvil, and no profession is more difficult to get a footing in than that of medicine.

The young physician should have an immense amount of courage. With a clear perception of what should be the main business of his life, and a fixed and earnest purpose to shape his course accordingly, he will find, although very hard work, that he will finally advance, with manly courage and a rational enthusiasm, into the great

battle-field that lies before him. That which a man holds himself to be he tries to be, and in the long run becomes. "Do you wish to be good?" asked St. Augustine, "then begin by being little." When Socrates was pronounced by the Delphian oracle to be the wisest man in Greece, he said that he knew only one thing, and that was that he knew nothing. The successful young physician will be a continuous and indefatigable student of medicine. The date of graduation will be the real commencement rather than the consummation of professional study. Daniel Webster said: "I know of no superior quality that I possess, unless it be power of application. To work, and not to genius, I owe success." Most ideals have this merit, at least, that he who makes even a feeble and abortive effort to reach them is benefitted in proportion to his advance, however small that advance may be. If he fails to seize the coat of gold, he carries away at least one of the sleeves. To use George Herbert's metaphor:

> ". . . . . Who aimeth at the sky,
> Shoots higher far than he who means a tree,"

If after a reasonable time the young physician does not secure a reasonably good practice, he ought to engage in retrospection—it may be his fault, not that of the public. He who is suffering from want of appreciation, want of business, and a consequent want of money, can always find a hidden fault within himself. To acknowledge a failure is to acknowledge a want of efficiency and competency. The reason some kites wont fly is because the caudal appendage is disproportionate to the superficial area. One more valuable hint. Though not so mentioned in the code, more than one sign-plate to each square yard of office front savors of self-assertion.

CHAPTER X.

PHYSICIAN'S FEES.

In this age wealth is made the goal of life—men preach and pray for gold, steal and murder for gold, while men of principle who are prepared and willing to contend faithfully and honestly for position are rarely met with and still more rarely succeed. Pecuniary emolument is not the object of life well spent, but is a blessing which flows naturally as a consequence. The man who wishes to accumulate wealth should never study medicine. It should never be made a trade. Thousands of physicians have no higher conception of their business than to assure a livelihood. This is a very low idea of one's occupation or business. If it is only to get a living, an expedient for earning bread and butter—there is little manhood in it. The phy-

sician who considers his profession as first of all a business venture, and losing sight of the scientific side of medicine converts it into a trade, had better be out of the business. There are physicians who graduate their sympathy and attention by the prospect of gain. They only enter the sick man's room to thrust their hands in his pocket. A life of benevolence and utility is certainly imposed on all who have chosen the healing art for a profession. No class of men, the clergy not excepted, give as much pecuniary aid in proportion to their means, to suffering humanity, as a physician engaged in the general practice of medicine, and no class are so often as grossly imposed upon. It seems characteristic of patients in general that convalescence from illness and gratitude for recovery are in inverse ratio one to the other, and the physician's only recompense is often the satisfaction always attending the performance of duty. Dr. Valentine Mott once remarked to a graduating class, "Young gentlemen, have two pockets made, a large one to hold the insults, and a small one for the fees."

While pecuniary considerations alone will never elevate and enoble the mind, but tend only to engender a sordid and a miserly disposition and temperament, yet the physician has to live and pay his debts, notwithstanding a good physician is ever working earnestly and honestly against his own financial welfare. He is, or should be, in favor of every idea, invention, thought or act that will prevent disease and suffering and add to the physical comfort of the people.

Few men have a better right to their fee than the physician. His expenditure of money, time and energy in study deserves substantial compensation. Few patients consider as they should the perplexities of his profession, loss of sleep, mental anxieties and moral responsibilities, the effects of which every conscientious physician must keenly feel. A physician cannot live on air, or hope; and, as the nature of his profession requires activity and labor, both of brain and body, he needs both brain and body sustenance. He and his family must be clothed and fed, and he is entitled to a just remuneration for his ser-

vices and the medicine used. The physician gets less when he saves human life than the undertaker could have received if he had the patient to bury, and much less than the lawyer would have charged if he had the chance to settle the succession. But our best physicians and surgeons must be men with scientific bent, and the very thing that makes them successful in the practice of their profession takes away from the practical business side so necessary to the material success of the medical man. Without a particle of business insistance, with child-like timidity, the physician humbly submits, without protest, to being paid at any old time, in a haphazard way, at long intervals, and then, usually, only a part of his bill, instead of the whole of it. The physician who is a poor collector of his just dues does not appreciate his own services at their full value, and under such circumstances his patients are very apt not to appreciate them either. In this intensely utilitarian and commercial age physicians must adopt sound business methods.

Every physician is willing to give his services

to the poor and unfortunate, but it is an aggravation to be swindled by dead beats, who take his time, and money where the physician furnishes his own medicines, with no intention of ever paying anything, and when the physician urges his bill, employs another physician the next time his services are required.

It is the lack of business, or of poor collecting which leads many young men into the very reprehensible business of "lodge doctoring." Many young men thus help to degrade the medical profession in order that they may make a living. "Doctoring a lodge," taking families *per capita*, at so much a head, is unprofessional, unjust, mean and venal, and cannot be too severely censured, and ought to receive the condemnation of every intelligent physician. It has a tendency to bring the profession into disrepute. It is unjust, because it robs many of patronage which their superior qualifications and honest merits entitle them to. It is mean, because it is beneath the dignity of the profession. It is venal, because no man hires himself by the year, and he cannot do justice to those he

attends. A physician should adopt the motto that if he can be of no honor to a profession, he should be sure that he is of no disgrace to it. Cheap doctors, like cheap goods, are of little value. Recently we read that a young physician accepted the position as community doctor, in a manufacturing town, for 240 families, at the rate of fifty cents a month per family. As a writer says: "If such a plan is carried out in other places, and under present conditions, we may soon expect to hear that other physicians will take care of a certain number of patients if their office rent, board and laundry bills are paid, and if they receive some pocket money." We have in mind a lodge doctor who furnished nearly every member who came to his office with a box of cathartic pills which he purchased at one dollar per thousand. Intelligent people are apt to appreciate a physician more if he values his own services.

CHAPTER XI.

SPECIALISTS AND SPECIALISM.

"Well, my boy, now you have got through with your school, what are you going to do?"

"Well, pop, I don't know; what I would like is one of those fancy jobs where you do the least possible work for the very largest possible fee."

"Well, I guess you are cut out for a corporation lawyer, my boy."

"No, pop, I was thinking of being a medical specialist."

It is much to be regretted that the tendency of modern medical practice is often to separate so much of the disease of one organ from that of another, and to dissociate, as if organs had independent action and could perform fully their functional requirements with very little connec-

tion with other parts; whereas there is the closest unity in the arrangement of the structures of the whole body, and special means are used to bring one function of the organism into sympathy and intimate relationship with another.

Specialties multiply so rapidly that the general practitioner is in danger of becoming a mere distributing agent. What with the surgeon, the aurist, the oculist, the rhinologist, the laryngologist, the obstetrician, the gynecologist, the laparotomist, the pediatrist, the psychiatrist, and the gastrologist, the general practitioner is pretty well robbed, and he has but little left of the body to which he can devote his skill. The family physician's function seems to be fast becoming that of adviser in general and referring to others.

Said one woman to another: "I'm taking four kinds of medicine. How many are you taking?" "Oh," replied the other, "medicine don't count. Operations are all the go now; I've had three this summer."

By the great increase of specialties the general practitioner tends to become less and less of the all-around man, less self-reliant and equal to all

emergencies, and withall a less valuable member of the profession. It only behooves him to work the harder, to provide himself with the best books, journals and instruments, and use every endeavor to become and keep as well fitted as possible. It is the old problem of the survival of the fittest, and if the general practitioner wishes to succeed he must use this means, otherwise he may go to the wall. At a recent meeting of a medical society in England the president said: "The physician, as a physician, must sooner or later become extinct. The general consulting physician is already almost extinct. 'Send for a specialist' is now almost the universal cry. It is only the antique type of patient who thinks of calling in a physician."

A young specialist, unacquainted, or with a very superficial knowledge of biology, natural philosophy, chemistry, physiology, histology, pathology and bacteriology, unacquainted with the nature of diseased processes, the means of resistence to invasions of disease, the provisions for natural recovery, and the phenomena of natural and acquired immunity, takes a three month's

course or so at a clinic or post-graduate school and blooms out as a specialist and puts himself on a par with the man who has spent years of expensive study abroad and as assistant to some master of the desired specialty for a goodly number of years.

Dr. Wm. Polk says that the tendency of all specialization is the narrowness and the exaggeration of minutiæ, and the safest guard against this is a broad foundation and a thorough knowledge of all the principles governing the whole field and a practical acquaintance with their expression as witnessed in disease and their application as required in remedial measures. He believes that the curse of the profession to-day is in the half-baked, underdone specialist whose exaggeration of details and magnifying of minutiæ blinds the credulous, preys upon the nervous and the apprehensive and ends in disappointing the patient and bringing discredit upon the profession they claim to adorn. Says Dr. L. Duncan Bulkley: "There is great danger that the modern development of specialism will tend to produce a narrower type of medical men, who, like the

mechanics, who know only their own department and work, and be unable to perfectly understand the relations of special portions of the field of medicine to others, and to the system at large."

Some say this is an age of specialists, and rightly so, from the standpoint that no man can be an expert in all departments. But a specialist should be the product of a natural development, not of a forced growth. This development comes through years of general training in the broader fields of medicine and surgery, during which time the individual finds a line of work which interests him the most, and for which he is best fitted from many standpoints. Thoroughly equipped specialists have discovered and developed new lines of thought and practice, and they have aided the ordinary practice of medicine by the clear description of disease which they have given in every branch of medicine. Obscure conditions of disease have been discovered and elucidated. If the rank and file of the profession do not absorb and assimilate the information and knowledge freely imparted by the specialist, it is their own fault. However, as we have said, the growing craze for

specialists is fraught with great danger, not only to the profession but to the public also.

The following lines were written by the late Dr. Wm. Tod Helmuth, who was one of the leading New York surgeons:

Of the genus "City Doctor"
Are species not a few;
There are many arrant humbugs,
There are others learn'd and true.
The over-weening egotist
Will tell you all he knows,
Some flourish on society,
And some depend on clothes.
One city man's an oculist,
A second treats the ear;
A third devotes himself to lungs,
And curious sounds doth hear.

A fourth, with his laryngoscope,
Will see your glottis quiver,
While many men the kidneys love,
And many more the liver.
Some specialists prefer the joints,
A few the brain and nerves;
Some spray away at old catarrhs,
With hope that never swerves.
Some think a man in buttons,
A coach and pair to drive,
May serve in lieu of wisdom
And thus expect to thrive.

But 'mid these varied callings all,
The man who heads the list
Is that gentle fingered ge-ni-us,
The gy-ne-col-o-gist!
He's such a charming fellow,
So clever in his way;
He always thrives in cities—
I meet him every day.
His rooms are overcrowded
With ladies, quite a host,
And if he has a wife, they trust
She'll soon give up the ghost.

God bless these noble specialists
In all they have to do;
And God have mercy on the souls
Of all the patients, too.

[*Nearly ready.*]

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